KANSAS MEDICAL JOURNAL.

VOL. VI. TOPEKA, KANSAS, SATURDAY, JULY 14, 1894. No. 28.

ORIGINAL ARTICLES.

Transverse Presentations.

By MAGGIE L. McCREA, M.D., Grantville.

Read Before the Kansas State Medical Society, at Atchison, May 4, 1894.

All the authorities on midwifery which I have consulted, divide the treatment of transverse presentations into external version, internal version, and the combined external and internal version.

During my college course the professor (Dr. Sarah Hackett Stevenson), in her lecture on this subject told us that ancient authorities on midwifery mention also the knee-chest position as a method of treatment, useful before rupture of the membranes has occurred. Although modern textbooks make no mention of this procedure, she advised us to employ it if we should ever have such a case in practice.

I have employed this method in two cases, and will here report the results.

Case No. 1 occurred in the Woman's Hospital of Chicago, during my service as junior interne. July 10, 1891, during the temporary absence of the senior interne, I was called to the obstetrical ward to see a patient in first stage of labor. Mrs. B., age 24 years. Of small stature. Previous history: had one child, a still-birth, about one year previously. Child was crossways and had to be turned. Patient lived on third floor and carried fuel and water from the basement. Also did a great deal of scrubbing. External examination: abdomen appeared unusually prominent just above umbilicus. Found a hard tumor in lower part of right lumbar region, evidently the fœtal head. Fœtal heart beat a little to the left of umbilicus. Vaginal examination: The antero-posterior diameter of the pelvis seemed shorter than usual. Os dilated to about size of silver dollar. No tumor could be outlined.

Diagnosis: Transverse presentation, with spine anteriorly.

Failing to find, by telephone, either the attending physician or senior interne, I returned to the patient and attempted external version. If any of you have ever attempted that operation you will be able to appreciate the amount of muscular force which it requires. I persisted for about fifteen minutes, the only appreciable result being the great pain which it caused the patient. As she insisted that she could no longer endure such suffering, I desisted and placed the patient in knee-chest position. The pains became less severe and, as the patient said, "more natural."

In about half an hour the head had descended sufficiently to be detected on the right side by a vaginal examination. At midnight it had become a vertex presentation. Position, right occipito-anterior.

If the patient assumed the lateral or dorsal decubitus, however, it immediately began to return to an oblique presentation. Patient continued in knee-chest position until 3 A. M., when the head became engaged in the superior strait, and there was no further tendency toward malposition.

After this I saw the patient about once an hour until 7 o'clock. There was slow progress until 6 o'clock; but after that hour there was no progress.

About 9 A. M., the attending physician made his rounds. After watching her for some time, he applied the forceps and left

her in my care. The senior interne returning soon afterward took charge of the case, and I returned tomy own department.

I returned just as the child was delivered, still-born.

There was no laceration, and the patient was apparently in good condition. In a short time I was hastily called by the nurse, and found the patient flowing very profusely. I immediately sent for the senior interne and applied massage over abdomen with the left hand, grasping the uterus with a kneading movement, and applying fingers of right hand to cervix in same manner, until the arrival of the senior interne.

As hemorrhage was still alarming, cold was applied to abdomen and ice to cervix; but as this also proved ineffectual, I was told to send for the attending physician, Dr. Franklin H. Martin, who was then in the building, and also requested to remain with the patient.

Dr. Martin applied Faradic electricity, the negative pole to the cervix and the positive pole over fundus-uteri. This checked the hemorrhage at once. After remaining until the patient had rallied, he left her in my care, instructing me to continue the current for at least an hour. There was no return of the hemorrhage. The patient made a good recovery, leaving the hospital in three weeks.

Case 2 occurred in Topeka. Saturday, October 1, 1891, I was called to see Mrs. M. B., African, age 22 years, washerwoman.

Patient had been in labor since Thursday evening, September 29. Membranes ruptured about 12 P.M., Thursday—thirty-seven hours before I saw the patient. Abdomen presented peculiar form, being very prominent just above umbilicus, similar to case 1.

External examination revealed hard round tumor in right iliac region. Fœtal heart beat very low in hypogastric region, immediately to left of median line. Vaginal examination: os dilated to about size of silver half dollar. Vault of vagina irregular with hard tumor in right side quite high; could just reach it with tip of finger.

Diagnosis: Oblique presentation with spine anteriorly.

Placed patient in knee-chest position, and assisted by external version, placing left hand against fœtal head and pushing to the left, while with right hand against most prominent portion of the tumor I pressed toward the right side of the patient.

After the tumor had assumed a less oblique position, and had descended a little, I inserted two fingers of right hand in vagina and pressed tumor toward patient's right side, continuing the external pressure with the left hand. This gradually effected a change, and in about two hours became a face presentation. Position, right mento-anterior.

Os continued quite rigid. I attempted to assist by dilating the os with my fingers. Patient, however, proved very obstreperous, and as this was my first professional experience with members of the colored population, I found myself unequal to the occasion, and sent for Dr. Lindsay. He had evidently had some previous acquaintance with representatives of this type of humanity, and in about five minutes the patient was very submissive.

After the os was dilated, forceps were applied and child delivered. There was a slight laceration of the perineum. Two stitches were put in, union by first intention.

Patient made a rapid and uneventful recovery, and in four weeks resumed her usual occupation.

In the second case I tried the knee-chest position with very slight hope of success. But judging from the result I believe this method should be tried before attempting internal version in all cases where there is not an urgent demand for immediate interference.

I wish also to call attention to the fact that both these women were accustomed to hard labor, which was continued during pregnancy. I have often heard that the women of semi-civilized nations do not suffer during parturition as do the women of civilized nations. Judging from these cases, I am inclined to regard these statements as somewhat hypothetical. While I advise my pa-

tients to take plenty of exercise during pregnancy, I caution them not to do heavy work, particularly not to lift heavy articles.

Bacteria in Eggs.

Modern Medicine.

Dr. Charles T. McClintock, of the University of Michigan, details the following experiments which indicate that eggs become infected with microbes, in many cases at least, before they are laid. This fact emphasizes the importance of securing for our fowls, as well as other food-producing animals, healthful conditions of life.

A healthy, laying hen was obtained, and after repeated washings in a solution of bichloride of mercury, followed by sterile water, she was placed in a sterilized cage. The hen continued to lay regularly every other day. The eggs were obtained as soon as possible after being laid, and a portion of them were placed in sterilized cotton and then in an incubator. If my memory is not at fault, all of those eggs decayed and swarmed with bacteria.

The remaining eggs were taken as soon as laid, and cultures were made from their contents. Some of these culture tubes developed; others remained sterile.

After some days the hen was killed, and with proper aseptic precautions culture tubes were inoculated from various portions of the oviduct. Most of these tubes developed. It would seem from this one case that the putrefactive bacteria entered the egg in its passage down the oviduct and before the shell was formed.

But to conclude that all eggs when laid contain putrefactive bacteria is not warranted. It is a matter of common household observation that a few eggs do not decay, no matter how long they may be kept, and the further fact that eggs packed in some dry material, as sawdust, salt, etc., and those greased or coated with gelatin, etc., keep longer than those left in the open air, would seem to indicate that the bacteria enter through the shell.

Nuclein the Germicidal Constituent of Blood.

Modern Medicine.

Prof. V. C. Vaughan, Dean of the Medical Department of the University of Michigan, has recently announced the discovery that nuclein is one of the constituents of the serum of the blood, and that this nuclein is possessed of germicidal properties. It is supposed that nuclein may be utilized therapeutically for increasing the germicidal properties of the blood, and thus combat certain forms of disease due to microbes. It has been suggested, for example, that a quantity of nuclein may be obtained from an animal which has been rendered immune to diphtheria or other germ diseases, and that the human body may be rendered proof against a given malady by the hypodermic injection of a proper quantity of the nuclein obtained as stated. There may possible be a great future in store for nuclein as a therapeutic agent.

THERE is no doubt about the value of Cactina Pillets. In heart troubles, especially those of neuralgic character, weak heart, exhausted energies, some neurologies and nervous prostration, Cactina Pillets will prove curative.

JOSEPH C. ELLIS, A.M., M.D.,
Frankford, Philadelphia, Pa.

IN diabetic patients, where cane-sugar must be eliminated from the diet, levulose may be substituted without injury to the patient and with entire satisfaction to the demands of their palates.

DR. L. H. KEYES, of Delphos, made us a pleasant call last week. The doctor is the paternal ancestor of the senior member of the Kaw Pharmacal Co.

Kansas Medical Journal.

PUBLISHED WEEKLY.

SUBSCRIPTION PRICE, INCLUDING POSTAGE:

Per annum, in advance..... $1 00
Single copies..... 15 cents

Subscription may begin at any time. The safest mode of remittance is by bank check or postal money order drawn to the order of the undersigned. When neither is accessible, remittances may be made at the risk of the publishers, by forwarding in Registered Letter. Address

KANSAS MEDICAL JOURNAL,
723 Kansas Avenue.

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Topeka, Kansas, Saturday, July 14, 1894.

The Newspaper and Physician.

Our attention is called to the following, which appeared in the *National Advertiser* under the caption, "Light All Around":

"The American Medical Association has decided that its Code of Ethics, although somewhat ragged around the edges, is still good enough to continue in use. The predominating feature of this worn and antiquated principle is that physicians under all circumstances must obtain all the free advertising possible, no matter how it affects the interests of their patients, and in no case to pay for an advertisement under the penalty of being cast aside as a quack. How long does the press of the country intend to allow itself to be used as a tool by the followers of this ancient code."

It seems difficult for newspaper men to appreciate the position of medical men in relation to advertising.

There are some points in the Code which we think should be expunged, but the section relative to advertising is not one of them. In the first place, a physician has nothing to advertise. A physician's success depends upon practical demonstrations of his skill and learning, and if he has these qualifications he does not need to advertise; if he lacks them, no amount of advertising can supply the deficiency. The physician who advertises superior intelligence and ability, or a greater degree of skill than his neighbor, does not benefit by the advertisement. On the other hand, he is credited with an excessive amount of gall and egotism, and is ridiculed both by the public and the papers in which he advertises. A recent demonstration of this fact was brought to our notice a few weeks ago. An article appeared in one of our daily papers detailing the particular ability and merits of a certain physician prominent in the political world. This article was marked "Adv.," and brought down the censure of the people and the papers. Yet we frequently find the papers criticising the policy of the profession in this regard. There is nothing in the Code of Ethics to warrant the statement that "physicians under all circumstances must obtain all the free advertising possible."

If a member of the medical profession in the pursuit of scientific study makes a great discovery of great benefit to mankind these facts become public property. The senator or congressman who makes a great speech and gains notoriety through the press can hardly be criticized for the free advertising he gets, but should he offer to pay for the interviews and the press comments his sun would soon set. When a physician places his card, giving his location and office hours, in his local paper, he has done all the advertising that can be of any material benefit to him or his business. In this connection we might offer a word of suggestion to the newspapers. The value of an advertising medium depends in great measure upon the confidence that can be placed

in the claims of its advertisers. A newspaper which advertises a quack nostrum guaranteed to cure all the ills that man is heir to, destroys confidence in its legitimate advertisements and lowers its value as an advertising medium.

As long as the columns of all the daily and religious newspapers are filled with advertisements of quack nostrums, curealls, and medicines to prevent conception and produce abortion, physicians can hardly feel that these are legitimate mediums for reputable advertising.

Take Something.

How often we hear this expression both from the laity and profession. The patient says "I feel dull and stupid," advice—"take something." "My headaches," take something. "I have a pain in my stomach," take something. What an indefinite, slipshod, unscientific, unsatisfactory and harmful expression this is especially when used by a physician. The patient gets an idea from the physician that it does not matter what that particular something is, so he gulps down something. He gets that idea from the doctor for he told him something would do. That something he gets at the grocery store, or drug store, and is something which has been loudly and persistently advertised and contains 200 doses at ½ cent each, and is wrapped in an immense quantity of paper and has very large letters on the label, so large that he who runs may read. Now, brethren, when a patient comes to you for advice do not put him off by saying, "you should take something." It is true they want something and in many cases should have it, but you are the man to give it or prescribe it, and if you have any advice to give be definite and protective to yourself and the profession. If you think they need something who is more capable of giving it than you are. They have sought your advice (for you never give advice unless asked to do so), and then you give it for the purpose of benefitting your patient, protecting the public and the profession and incidentally your own honor and exchequer. In this way your own dignity and that of the profession is maintained by impressing on the mind of the patient, the fact, that scientific knowledge is necessary in selecting "that something to take," for the purpose of restoring him to health. By this means you do away with the idea of some of the older people expressed by one of them to my son the other day when he said, "I was up to your pap's shop the other day getting my ears slushed out."

Home Treatment of the Drunkard.

Dr. Breed, in *Medical News*, reports seven cases treated in his private practice by the nitrate of strychnine. He injected 1-20 of a grain every evening, gradually increasing it to 1-12 grain on the twelfth day, and then decreasing it until the thirty-third day when it was again 1-20 of a grain, and then decreasing five days down to nothing. He gave sulfonal to relieve the restlessness. By the third day the desire for liquor was abolished, and the appetite for food began to be felt. Under this treatment the mind became clear, the bodily strength returned, and the patient felt like a new man.

We believe the fluid extract of hyoscyamus given in ten to fifteen-drop doses two or three times a day would be preferable to sulfonal where there is a tendency to melancholly or hyperacidity of the stomach.

We would be pleased to hear from our physicians who are treating alcoholics in their private practice, what they are using, their plan of treatment, and the result.

SOMATOSE is the name given to a substance prepared from meat containing its highest nutritive value. It is described as a soluble powder having an agreeable taste, being soluble and odorless. It is best given in milk and is highly nutritious.

Expert Witness.

The law recently passed in Illinois, published elsewhere in this number, providing for the appointment of a number of medical experts to serve for a term of one year is directly in line with the suggestions set forth in a discussion of the subject in this *Journal* some years ago.

It has long been recognized by medical men and by the legal fraternity that expert testimony should be placed upon an independent basis. In criminal and in civil cases expert witnesses employed by the counsel or parties in the cases are almost sure to be biased in favor of their side. This is a most natural result of the influences brought to bear upon the witness while in preparation for the testimony. Employed as a witness for only one side of a case his investigations will naturally be in a line tending to support the position of his client. These facts were very clearly demonstrated some few months ago in the Prendergast trial and the evident prejudice of the experts on both sides of the case brought considerable, and we may say, very just, censure of medical testimony.

An expert witness appointed by the state and paid by the county should be entirely independent in his judgment. He should be that in any case but human nature is probably of the same kind in medical men as other men.

Golden Belt Medical Society.

The Golden Belt Medical Society met in Salina, in the office of Dr. Dewees, Thursday, July 5, 1894.

Present: Drs. O'Donnell, of Ellsworth; W. R. Clement, of Marquette; J. F. Somes, of Lindsborg; W. E. Fowler, of Brookville; E. W. Hathaway, of Cambria; L. H. Murphy and J. F. Brewer, of Minneapolis; J. W. Felty, E. E. Hazlett, and E. B. La Fevre, of Abilene; O. F. Searle, Solomon City; M. B. Ward, G. A. Wall, S. E. Sheldon, and J. E. Minney, of Topeka; W. B. DeWees, W. S. Harvey, and W. H. Winterbotham, of Salina.

After the routine business of the meeting had been transacted, Dr. Clement read a paper on the "Cure of Reducible Hernia by Hypodermatic Medication," presenting a case so cured. He injected the agent in the margin of the ring at different points. The irritation causes an exudate to be thrown out, which becomes organized and adhesion takes place. The injection may be repeated after all inflammation has passed off if the cure is not complete.

Dr. Somes' paper was on "Alkaloidal Medication." The points in favor of the use of the alkaloids were: First, the exact dosage; second, reliable strength; third, positive effect; fourth, smallness of the dose; fifth, convenience of administration.

Dr. Harvey made some remarks on "How Shall We Correct Myopic Astigmatism in the Presbyope," saying that in low degrees the plus cylinder placed at right angles to the minus astigmatism would correct the error.

Dr. Hathaway reported a case of foreign body in the rectum. He was called to the case September 4, 1893. He found a man with a cottonwood limb projecting from the anus. The limb on measurement, after removal, was thirteen inches long and three in circumference, From eight to nine inches of the large end, or head, had been inserted. The large end of the limb had been cut off just above where a small limb put out, and the small limb had been cut off about one inch from its attachment at an obtuse angle and from within out, leaving a cutting edge, and when pulled upon reached out and included more of the tissue. There were knots below on the limb. The patient had attempted to remove the limb, using all the force he could, and had other members of the family pull at it, but to no purpose except to tear the rectum. The doctor introduced his finger high up, pushed the sapling up until the point of the small limb could be felt free from the gut, and then withdrew the trunk and limb together

(of the bush). In about six hours the doctor was called back to relieve the pain. He gave three-fourths of a grain of morphine hypodermically, which had but little effect. In a few hours he gave one grain of morphine hypodermically and repeated this every six hours until the patient died, about thirty-three hours after the injury.

The general opinion was that the rectum had been torn through high up. In such case Dr. Ward favored putting the bowels at rest, avoiding cathartics of all kinds and injections.

The reason assigned by the patient for introducing the knotty limb was "to scratch himself."

Dr. Dewees reported a case of billiary calculi lodging in the cæcum. He amputated the cæcum, cleansed the cavity, and closed it up. Owing to the large amount of pus, the excessive lesion, the age of the patient (63 years), and the exhausted condition of the patient, he did not expect recovery, although the patient rallied and lived twenty-three hours, dying of pyæmia.

The report was discussed by Drs. Sheldon, Brewer, and Ward.

In closing the discussion Dr. Dewees said if he had to repeat the operation he would remove the mass, cleanse thoroughly, pack with iodoform gauze, clean and repack, and let the wound heal from the bottom. It is an axiom of the surgeons present that a pus cavity should never be closed.

Dr. Ward read a paper on "Emmett's Operation." He advocated the operation where there was no disease beyond the uterus, preferring silk strings to Skeene's tenaculum to hold the lips of the wound apart.

Dr. Felty: Emmett's operation is done too much. It benefits the operator more than the one operated on. If there is trouble beyond the uterus an operation on the lacerated cervix does more harm than good, but where there is no disease beyond the uterus it is good surgery to repair the laceration.

Dr. Felty: The paper does not tell the general practitioner in what class of cases to operate. In addition to the remarks already made, I would say that during the menopause, when there is some hemorrhage and the health is failing, an examination should be made, and if there is lacerated eroded cervix it should be removed.

Dr. Hazlett read a paper on "Malarial Fever in Children in the Kansas Valley." The doctor claimed that it differed from anything described in the text-books. He wanted to know the cause of its continuance in so many cases. The doctor reported a number of interesting cases, but the continuance of the fever was the main point dwelt upon.

Dr. Brewer: I have had quite an experience with typhoid fever and with the continued malarial fevers of this section. In the latter, constructives cured them as often as quinine, although they were clearly of malarial origin. In continued fever feed the patient and let him get well the same as in typhoid.

Dr. Hawthorne reported two cases of continued malarial fever. One he controlled or broke up in twenty-four hours by twenty-grain doses of the nitrate of potassium every four hours. The other case was cured by twenty-drop doses of iodine every four hours for ten days.

Dr. Searle reported cases of continued fever running from nine to twelve weeks, and medicine appeared to do no good.

Dr. Sheldon: I began treating these fevers in the Kaw valley in 1866. The continued fevers spoken of in the paper and in the discussion are malarial fevers, and should be treated by quinine and intestinal antiseptics and constructives. Quinine to overcome the malarial element, antiseptics to render the alimentary tract aseptic, such as iodine, carbolic acid, corrosive sublimate, boric acid, listerine, etc., and nourishing, assimilable food to build the system up.

Dr. Harvey: When quinine does not relieve these cases in four or five days I treat the intestinal tract with antiseptics.

Dr. La Fevre: If it is true malarial fever it will yield to quinine and arsenic. From 60 to 120 grains of quinine may be required in twenty-four hours in some cases. Quinine and aromatic sulphuric acid are not intestinal disinfectants. They are absorbed

before they reach the intestines.

The meeting was well attended, interesting, and well presided over by Dr. Murphy, of Minneapolis, who was happy over the successful meeting.

Program of N. E. K. Medical Society.

Program for the Northeastern Kansas Medical Society, to be held in Whiting, Kas., Tuesday, August 14, 1864:

"Is Alcohol a Food?" Dr. S. E. Sheldon, Topeka, Kas. Discussion, Dr. A. B. McCandless, Holton, Kas.

"Cholera Infantum," Dr. S. M. Riggs, Muscotah, Kas. Discussion, Dr. J. E. Love, Whiting, Kas.

"Rectal Diseases," Dr. J. W. Graham, Wetmore, Kas. Discussion, Dr. P. R. Moore, Effingham, Kas.

"Strangulated Hernia," Dr. J. T. Scott, Holton, Kas. Discussion, Dr. B. S. Stewart, Netawka, Kas.

"Infantile Opthalmia," Dr. R. S. Magee, Topeka, Kas. Discussion, Dr. J. A. Rafter, Holton Kas.

J. A. RAFTER, Secretary.

Hives "As I See It."

Ben. Brodnax, M.D., in Virginia Medical Monthly.

I have on several occasions been a little puzzled by finding in the writings of "specialists in diseases of the skin" the following heading: "Urticaria, Hives or Nettle Rash." It seems impossible for any one who has studied at the bedside the common skin eruptions, to make such a mistake in classifying, as one, two that are so dissimilar, both in causation and appearance. I have thought either the city specialist has never seen a case, because most common in country districts, of hives (called by Rezin Thompson, M.D., in his *Medical Adviser*, strophulus), or they have taken the classification from some writer, and, without examination as to whether right or wrong, have copied it as a text for a disertation on urticaria.

There are hardly to be found two diseases so very dissimilar—urticaria coming on suddenly from a disordered stomach, the other by a regular systemic disturbance.

The peculiarities of constitution in some who are affected by certain medicines, such as ipecac, quinine, etc.; others in whom foods of different kinds; others who cannot stand certain animal odors, such as freshly killed beef, or the aroma of certain flowers, without having to suffer with an attack of more or less violence, all go to show that it is a form of nervous irritation. It comes on suddenly, in irregular shaped wheals, large and small, and often, by very simple treatment, as quickly disappears, leaving little or no trace of the terrible infliction and pain of a few moments previous. It is confined to no particular age, but is seldom found in those under a year old.

Hives, on the contrary, is preceded by a fretful unrest, at first a light fever, which soon becomes higher, more or less disturbance of the bowels, lungs, and bronchia. Very fine blisters, exceedingly small as to size, cover the entire body, with itching. After three or four days the fever subsides, skin becomes more natural in color, and scales off in very fine particles. In the majority of the cases the symptoms are not very severe, but I have seen a few in which the whole course was exaggerated, and convulsions were actually present or threatened, and difficulty of breathing amounted almost to suffocation. In five to eight days from first symptoms the troubles are mostly passed off.

This disease is confined to the first few weeks of infant life—rare beyond the second, and equally so after the ninth week. In fact, so much does it resemble measles of later life, that I have believed it to be a form of that disease, peculiar to that age, and have treated it in same manner. The treatment is simple, and a physician is not often specially called in to prescribe, the older ladies preferring to take entire charge and medication. But in severe cases, I give one-fourth grain doses of calomel until two

grains are taken, one every half hour; afterward a bismuth mixture to relieve the bowels; a turpentine and oiled cloth on the chest; about four ounces of warm sage tea, with four or five grains of Dover's powder in it, one-half to one teaspoonful, as required, to help the throat and lungs. Some more sage or mint tea, weak with a little glycerin, a few drops of carbolic acid, or chloral hydrate, to quiet the itching about completes the list. I think about forty per cent. of all infants have the complaint within the first six or eight weeks after birth.

These remarks are not intended as a criticism of the learned men of the profession so much as to urge the necessity of greater care in classifying, so that those who have to rely on their teachings and writings will not have the experience of a distinguished Southern physician, who remarked, "Many years of a doctor's life after he gets into practice are spent in *un*-learning that which he has spent years at college in trying to learn." All mistakes should be those of the type-setter.

Expert Witnesses in the State of Illinois.

The following is a draft of a bill for an act authorizing the judges of criminal jurisdiction in the State of Illinois to appoint persons to act as expert witnesses.

Be it enacted by the people of the State of Illinois in the General Assembly represented, that the judges of the circuit and superior courts of the State of Illinois, be and the same are hereby authorized to appoint in the month of January of each year, persons who shall act as expert witnesses in the medical and other sciences in giving opinion upon the evidence, as presented in a hypothetical form, of criminal causes that may be on hearing in the courts presided over by the said judges. Such expert witnesses shall hold their said appointments for one year or until their successors are appointed and qualified. They shall be entered as expert witnesses upon a list of such witnesses kept by the circuit clerk, and the said clerk shall issue a certificate of appointment of such expert witness to the person appointed as above.

Such expert witnesses shall be citizens of the State of Illinois and shall be known in the communities where they reside for their professional competency and personal probity, and if physicians they shall have been at least five years in regular and active practice. When expert opinion is desired in any cause pending in a criminal court, the trial judge presiding in such cause may, at his discretion, summon for duty under this Act, such expert witnesses to the number of three. Such expert witnesses shall be paid for their services by the county in which the trial for which they are summoned is held, in such sums as may be named by the judge.

It shall be the duty of such expert witnesses to give an opinion on the evidence as presented in hypothetical form in the case in which they are called. Such experts shall be subject to cross-examination by both prosecution and defense; but such cross-examinations shall be limited entirely to the subjects embraced in their opinion.

In criminal cases previous to trial, if the State's attorney deems it advisable to have expert opinion he shall state to the court having jurisdiction of the cause, and the judge receiving such statement may summon expert witnesses to serve under this Act.

"THE use of chloride of sodium in acute anæmia is advocated. One ounce of a 50 per cent. solution deeply injected in the lax tissues is tolerated. The claim is that the concentrated salt solution is very hydroscopic. It soon absorbs the water of the surrounding tissues and quickly enters the circulation. It raises the blood pressure and stimulates the heart." If it is meant that chloride of sodium is a curative agent in acute anæmia, or in anæmia at all, why not give it per orem? The benefit derived over the latter method is due simply to the pain, shock and psychical effect.

Relation Between the Alkalinity of the Blood and Intestinal Absorption.

Gazetta Degli Ospitali.

Castellino and Cavazzani experimented to discover whether, and how, the process of absorption from the intestine is modified in association with altered physical and chemical conditions of the blood; to establish how such changes of the blood influence in the human subject the general metabolism of the body.

They found that in distinctly alkaline serum the reticulum of the hyaloplasm of leucocytes undergoes stimulation, which causes increased irritability and more active vital manifestations in the protoplasm. In liquids poor in alkali the protoplasm appears torpid and slow in its reactions, but contact with alkaline serum speedily evokes increased activity. Contact of faintly alkiline serum with leucocytes in a medium favorable to their activity depresses the movements of the latter and accelerates the processes of degeneration. Serum which is but faintly alkaline tends to produce transparency of the protoplasm, and throws out the nucleus.

From the foregoing it is argued that alkilinization of the blood favors intestinal absorption, and that as the passage of foods through the intestine through the mucous membrane is propably due, in great measure, to the activity of the cells lining the villi and to the leucocytes, alkalies would cause an increase in the rapidity of absorption by stimulating the activity of the protoplasm and increasing its chemiotactic powers.

Nomenclature of Infectious Diseases.

Dr. Thompson in the *Bulletin* snbmits the following classification of infectious diseases:

1. All infectious diseases are due to the presence of their specific living micro-organisms in the body.

2. Infectious diseases are divisible into three classes—viz: (1) communicable; (2) non-communicable; and (3) the septic.

3. The communicable diseases are those whose origin is from an animal body. Examples are—smallpox, Asiatic cholera, and tuberculosis.

4. The non-communicable diseases are those whose origin is not from an animal body, but from a place or thing. Examples are—ague, yellow fever, and miasmatic diseases in general.

5. The communicable diseases are divisible into two classes according to the *ordinary* modes of their communication, viz: (1) contagious and (2) non-contagious communicable diseases. Contagious communicable diseases are those in which simple proximity to the infected is sufficient to communicate the infection to those susceptible to it. Examples are—typhus fever, scarlet fever, measles, mumps, whooping-cough, etc. Isolation of the sick is therefore needful to prevent infection. The non-contagious communicable diseases are those in which the communication is not by simple proximity to the sick, but due to intermediate means of communication. Isolation is therefore neither needful or effective, in comparison with measures directed against the intermediate means of infection. Examples are—typhoid fever, Asiatic cholera and tuberculosis.

6. The septic infectious diseases are those in which the infection enters through a wound or through the inflamed skin or mucous membrane. Examples are—erysipelas, hydrophobia, tetanus, etc.

DR. DYKES, Secretary of the State Board of Health, is making an inspecting tour of the State in the interest of preventive medicine. The packing-houses at Kansas City and other points are and will receive personal attention. The stench from some of these institutions is sickening. The doctor is doing good work and will be supported by the profession. He is anxious to hear from every physician in the State where there is a lax sanitation.

The Physiological Action of Alcohol.

The Maryland Medical Journal.

Dr. David Cerna, in a very exhaustive article based on laboratory experiments on the physiological action of alcohol (*Therapeutic Gazette*), draws the following conclusions as the result of his work:

1. Alcohol in small amounts excites and in large doses depresses both the peripheral motor and sensory nerves.

2. Excessive quantities cause a spiral degeneration of the axis-cylinder of nerve fibers.

3. Reflex action is at first increased and afterwards diminished by an influence exercised by the drug upon the spinal cord and nerves.

4. In small amounts the drug stimulates the cerebral functions; it afterwards, especially in large quantities, depresses and finally abolishes them.

5. Alcohol causes lack of co-ordination by depressing both the brain and the spinal cord.

6. In toxic doses alcohol produces hyperemia of both brain and spinal cord, especially of the lumbar enlargement of the latter.

7. Small doses of alcohol produce increased rapidity of the cardiac beat; large amounts, a depression of the same. In either case the effect is brought about mainly through a direct cardiac action.

8. The drug in small quantities causes a rise of the arterial pressure by a direct action upon the heart; in large amounts it depresses the arterial pressure similarly through a cardiac influence.

9. In large doses alcohol enhances coagulation of the blood; in toxic quantities it destroys the ozonizing power of this fluid, causing a separation of the hemoglobin from the corpuscles.

10. Alcohol in small doses has little or no effect on the respiratory functions; in large amounts it produces a depression of both rate and depth of the respiration through a direct action on the centers in the medulla oblongata.

11. The drug kills by failure of the respiration.

12. On the elimination of carbon dioxide alcohol exercises a varying action, sometimes increasing, sometimes decreasing, such elimination.

13. The action of alcohol on the amount of oxygen absorbed also varies and may be said to be practically unknown.

14. The drug lessens the excretion of tissue-waste, both in health and disease.

15. In small amounts alcohol increases the bodily temperature; in large doses it diminishes the same. The fall of bodily temperature is due mainly to an excess of heat dissipation caused by the drug.

16. Alcohol, in sufficiently large amounts, has a decided antipyretic action.

17. In moderate amounts alcohol aids the digestive processes.

OFFICE OF BOARD OF HEALTH,
TOPEEA, KAS., July 12, '94.

To the Kaw Pharmacal Co.—GENTLEMEN: I am very much pleased to state that I have used your preparation of guaiacoline both in my private and city practice and find it very beneficial in all lung difficulties, being almost a specific for asthma and nervous prostration, and I cheerfully give you this as my recommendation of my experience with the preparation.

It is a long felt want and should be generally used by the profession.

I remain respectfully.

J. B. HIBBEN, M.D.,
City Physician and Sec'y Board of Health.

SUGAR of milk is often an efficient agent in regulating the bowels of infants. If there is tendency to diarrhœa a few grains of sugar of milk will answer every purpose; or if there is constipation it may be combined with a little soda and sufficient action is usually obtained. It is much preferable for general use in the nursery to castor-oil and laudanum.

IN calling to the attention of our readers the latest production of the laboratory of F. Stearns & Co., of Detroit, Mich., we reiterate the statements which are made by them concerning their product, which would seem of interest to members of the profession who desire to obtain the latest and seemingly the best form of iron. Messrs. F. Stearns & Co. claim that their product is a natural proteid of iron, thereby differing entirely from artificial mixtures of albumen or pepton with iron. It is aseptically prepared from fresh bullock's blood, and contains all the iron of the blood. A few of the advantages they claim for it are its ready solubility, sweetness of odor, pleasantness of taste, and its non-constipating and non-irritating properties, and the fact that it will not injure the teeth, being non-styptic. They offer their preparation in pilloid form, which in itself is an advantage, being a form of medication easily administered. Messrs. Stearns & Co. offer to supply samples and literature free to all inquirers, and request that the medical profession give their Hæmoferrum a trial.

Prunus Virginiana as a Heart Tonic.

Dr. Seymour Taylor, in the Clinical Journal.

"There is yet another drug which I venture to think may be unknown to some of you. That is prunus virgiana or American wild cherry. My attention was first called to it some years back by an article in one of the journals by Dr. Clifford Allbutt. I can reiterate all that he says in praise of the drug. It relieves the flagging and distended ventricle of the chronic bronchitic, it stimulates the flapping chambers of the anæmic, and it increases the muscular tone in subjects recovering from fever and other exhaustive diseases. It is also given with great advantage in the irritable 'convulsive' heart of the overworked man of feeble physique. It is especially useful in dilatation of the right heart, whether as a result of chronic bronchitis or of mitral stenosis. I use it more in private than in hospital practice; and perhaps no drug has brought me so much credit."

This action of prunus virginiana on the heart is not described by our authors on Materica Medica and Therapeutics. In the U. S. Dispensatory (17 ed.) we find "when very largely taken it diminishes the action of the heart. Thus Dr. Eberle found draughts of the cold infusion, taken several times a day, and continued for nearly two weeks, to reduce his pulse from seventy-five to fifty strokes in the minute. But in the doses usually prescribed the remedy is too feeble to exert much influence." Possibly the long continued use might produce the results claimed in the above article. We are inclined to believe, however, that whatever its action on the heart may be it is dependent upon the effect of the prussic acid it contains upon the pneumogastric and the cardiac ganglia. Wild cherry is in the western part of the country, at least, a household remedy and is largely used as a stomachic tonic, and as an ingredient of cough mixtures.

WE have received the annual announcement of the Topeka Business College, an institution well known to the business men of Kansas. Too much cannot be said of the value of a thorough business education. We are often strongly impressed with the fact that physicians are too utterly ignorant of ordinary business methods. A thorough literary course is very essential to the study of medicine, but a thorough business course is just as essential to financial success as a practitioner of medicine.

DR. ALLEN STARR says he has (May 15, 1894) ten cases of myxœdema under observation and all of them almost entirely cured by the use of the thyroid extract. He further says that "those afflicted with this disease will have to take the extract for the rest of their lives. We would like to know why he makes the assertion.